State of Wisconsin Department of Natural Resources Private Water Systems Section - DG/2 dnr.wi.gov

High Capacity, School or Wastewater Treatment Pla **Well Approval Application**

Form 3300-256 (R 7/05)

DEC 2 3 2013

Notice: Prior department approval is required for the construction, reconstruction or operation of a high capacity well be specified by the prior high capacity wells, a school well or a wastewater treatment plant well in accordance with Section NR 812.09(4)(a), Wisconsin Administrative Code. Personally identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a well or wells on a high capacity property, seek approval to make other changes to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or

more duplexes is regulated under cit. NK 611, Wis. Adm. Code. See NK 611.01, Wis. Adm. Code for applicability requirements.							
Applicant Information							
Application Prepared By (Name and Title) Company HAUPT WELL DRILLING INC.							
JEFF HAUPT		HALLY	OT WELL URI	111	NG LNC.		
Street Address	_ /	City A		State	ZIP Code		
P. O. Box /	36	BURNBALE	WI	544/2			
Telephone Number	Fax Number		E-Mail Address				
715-652-2236 715-652-8014							
Property Ownership Information							
Property owner, if different than applicant (Name of Person and Title)	Company	. D		0 1		
FREISE FARMS	S	CON	CONTACT: BILL FREISE				
Street Address		City		State	ZIP Code		
N2025 STATE	ROAD 54	ME	LROSE	MI	54642		
Telephone Number	Fax Number		E-Mail Address				
608-797-4546							
Well Operator Information							
Well operator if different than owner (Name	e of Person and Title)	Company					
Street Address		City		State	ZIP Code		
Telephone Number	Fax Number		E-Mail Address				
•							
Property Information							
Enter the High Capacity Well File Number be	elow if the property is already a	a high capacity	property. If the property is no	t designa	ated as a high capacity		
property at the time of application, enter "NC	NE." NOTE: Find the file num	ber in upper ri	ght hand corner of the most re	cent high	n capacity well approval,		
or use the compact disk of departmental well data that is issued to drillers and pump installers. On the compact disk, see "File location" in red print in "Location" section. File number format is as follows: (1 or 2 digits for county) - (1 digit for well classification) - (1 to 4 digits for assigned property no.).							
County Town High Capacity Well File No.							
JACKSON TRVING (WEST) NONE							
Submittal Purpose							
Check all that apply:							
Install one or more new wells with a capacity greater than 70 gallons per minute.							
Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property.							
Replace one or more wells with a capacity greater than 70 gallons per minute.							
Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property.							
Reconstruct one or more wells with a capacity greater than 70 gallons per minute.							
Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property.							
Increase pumping rate in one or more wells to a rate greater than previously approved.							
Request continued operation of high capacity wells after a change in ownership. (No application fee required.)							
Renew a previous approval that has expired.							
Well (or wells) will serve a school or wastewater treatment plant. See definitions on page 5.							
Other, explain							

			Tomicolo Zoo (xxxxxx)
Site S	Statu	s Information	
and ti	ne inf	the site status using the internet or the compact disk of departmental well data the formation supplied by the property owner. Internet address is dnr.wi.gov/org/waterwing questions.	at is issued to drillers and pump installers r/dwg/dws.htm. Enter YES or NO for each
YES	NZ.	Has the property boundary changed since the most recent high capacity well appyet a high capacity property, check NO.	roval was issued? If the property is not
	×	Has there been a change in well ownership since the last approval was written? If YES, name of current owner:	Date of purchase:
	Ø	Has there been a change in well operator since the last approval was written? If YES, name of current operator:	Date of change:
	X	Will a proposed well be connected to a plumbing system that is supplied by other supply, etc.)? If YES, include a schematic drawing showing backflow protection.	
	X	Is a proposed well within 1,200 feet of a landfill? Determine if there are any landfil compact disk FIND feature. Enter the township, range and section of the well localso check the adjacent section or sections. If YES, list the landfill site ID Number: OR Landfill location:	ills nearby, using the well information ation. If the well is near a section line, (Township/Range/Section)
	M	Is a proposed well on a property that has a contaminated site? If YES, list the BI Redevelopment Tracking System) Number here and specify if the site is open or	RRTS (Bureau for Remediation and closed:
	X	Is a proposed well on a property that has a groundwater use restriction recorded number, as assigned to the contaminated site by the DNR remediation and rede	on the deed? If YES, list the BRRTS
	X	Is a proposed well on a property that is listed on the department's registry of clos restriction? See compact disk or internet at maps.dnr.state.wi.us/imf/dnrimf.jsp? here:	sed remediation sites for a groundwater use site=brrts. If YES, list the BRRTS Number
	X		
	X	Is a proposed well to be installed within a special casing area? Refer to the list of by the department and/or contact the regional DNR office.	
	X	annrovai was issueu :	
	X	the most recent high canacity well app	proval? If the property is not yet a high
	X	Is a non-pressurized storage vessel (i.e. reservoir) other than a pond proposed	or in use?
	X	Will the well discharge directly to a storage pond?	
	X	Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in	use?
	X	Is a proposed well within 1,200 feet of a quarry?	
		Are any existing well installations on the high capacity property out of compliant Administrative Code?	ce with Chapter NR 812, Wisconsin
	X	Will the well be used as a source of bottled water?	
) (X	the averience to construct a well that has a canacity of less than i	70 gallons per minute to low capacity well

Is the property served by a community water system?

Existing Well Information		<u>.</u>				. 16	. Hanni	Faur 11	rolle eubmit	l additional	sheet	S'		
Enter the following information on a	li exis	ting we	lls on t	he pro	operty	, it more	e tnan	IOUI W	rens, submi	Laudibosiai	T			
Well Name Assigned by Well Owner (North Well, etc.):	N	01												_
Well Number Assigned by Owner (001, 002, etc.):														_
WI Unique Well Number or NA if no number:														
Permanent DNR High Capacity Well Number or N/A if none:											<u> </u>			
Public Water System ID Number, if Public (if not public, NONE):											_			
Potable or Non-Potable Use:											-			
Type of Well (Irrigation, Industrial, Residential, etc.):											_			
Requested Average Water Usage per Day in Gallons:														
Requested Maximum Water Usage per Day in Gallons:														
Seasonal? (April to October, Year Around, etc.):											_			
Approved Pumping Capacity if Previously Approved (gpm):									·····		-		<u></u>	
Current Pump Type & Capacity (gpm):													<u></u>	
Proposed Pump Type & Capacity If Change Requested (gpm):														
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):											-	<u></u>		
Discharge Location (Building Pressure Tank, Pond, etc.):											_			
Height of Well Casing Above Ground in Inches:											_		***	
Potential Contaminant Sources and Distance:		<u></u>									_			
Well Loc: Quarter Quarter Section		1/4 (of	1/4		1/4 c	of	1/4	1/4	1 of1	/4	1/4 of		1/4
or Government Lot Number	<u> </u>													
Section or French Long Lot No.														
Township:	Т			N	T			<u> </u>	T	N				N]w
Range (Select E or W):	R		<u> </u>	w	R		<u> E</u>	∐w	1	<u>LEL</u>	WR	0	<u>L</u> EL	
Latitude (Degrees and Minutes)	<u> </u>	0			<u> </u>	<u> </u>		 :			= :		_'	<u></u>
Longitude (Degrees and Minutes)	<u></u>	0												
GPS Map Datum (WGS84,	Ţ													2 -
WTM91, etc.) Include as much of the following information record is attached, a	nation ipplicar	as pract nt may le	ical for v ave the	vells t follow	hat do ing ro	not have	well co	onstruc	ction records	attached to t	ne app	olication, how	everifu	ne
Date of Construction:					<u> </u>				ļ					
Drilled by (Name of Drilling Firm):					<u> </u>					<u>, , ,</u>				
Drilling Method(s) (Rotary, Percussion, Etc.)					<u> </u>						_			
Well Depth in Feet:														
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:		inches,		feel		inches,		feet	inche	s, <u>f</u>	eet	inches,		feet
Lower Drillhole Diameter in Inches and Depth in Feet:		inches,		fee		inches,		feet	inche	es, f	eet	inches,		feet
Well Casing Diameter in Inches and Depth in Feet:		inches		fee	<u>t</u>	inches,		feel	inche	es, f	eet	inches,		feel
Well Casing Material and Wall Thickness:														
Annular Space Material Between Casing and Drillhole Wall:					_									
Is There a Well Screen (Y or N) If so Screen Material?:	',													

Proposed Well Information			
Enter the following information on all ;	proposed wells on the property, if more than two wells	or alternate construction, submit ad	ditional sheets:
Well Name Assigned by Well Owner (North Well, etc.):			
Well Number Assigned by Owner (001, 002, etc.):			
Well Loc: Quarter Quarter Section or French Long Lot Number	NW 1/4 of NW 1/4 of Section 25	1/4 of 1/4 of 5	Section
or Government Lot Number			
Township & Range (Select E or W)		T N, R	LEW
Latitude (Degrees and Minutes)	44 • 11.117	<u> </u>	
Longitude (Degrees and Minutes) GPS Map Datum (WGS84, WTM91, etc.)	<u>90 · 56026 · </u>	<u> </u>	
Type of Well (Irrigation, Industrial,	Type: /RRIGATION Potable Non-Potable	Туре:	Potable Non-Potable
Drilling Method(s) (Rotary, Percussion, Etc.):	epths that Are Expected During Drilling:		
Material and Depth Interval:	SAND, CLAY from 0' to 77	from	0' to '
Material and Depth Interval:	SANAROCK from 77 to 300	from	' to '
Material and Depth Interval:	from 'to '	from	' to '
Material and Depth Interval:	from ' to '	from	' to '
Material and Depth Interval:	from ' to '	from	' to '
Drillhole Diameter and Anticipated Dep			
Diameter and Depth Interval:	70" from 0'10 80 1	from	' to '
Diameter and Depth Interval:	15" from 80 to 300 to	from	' to <u>'</u>
Diameter and Depth Interval:	from ' to '	from	' to'
	nd Wall Thickness at Anticipated Depth Intervals:		
Diameter and Wall Thickness at Depth Interval:	16 "diam/, 250" thick 0' to 80 '	" diam/ " thick	0 ' to
Diameter and Wall Thickness at Depth Interval:	" diam/ " thick ' to '	" diam/ " thick	' to '
Permanent Casing or Liner Material , It	Used:		
Casing Joints (Welded, T and C, etc.)	MELDED		
Material and Weight at Depth Interval:	A53B142 lbs/foot 0' to 80.	/ lbs/foot	0 ' to '
Material and Weight at Depth Interval:	/ lbs/foot ' to '	/ lbs/foot	' to '
Screen Material, Slot Size in Inches and Depth Interval or N/A if none:	N/A / "/ 'to '	1 11	' to '
Casing to Screen Joint (Welded, T and C, K Packer, etc.) Annular Space Material Including Filter	Pack Margial If Used		
Material and Depth Interval:	BENTONITE \$ 1 0' to 80.	,	0' to '
Material and Depth Interval:	CUTTINGS, to	1	' to '
Proposed Average Water Usage Per	/ /		
Day in Gallons: Proposed Maximum Water Usage Per	612,000		
Day in Gallons: Seasonal? (April to October, Year	1,224,000 APRIL - OCTOBER		
Around, etc.): Proposed Pump Type & Capacity			
(gpm):	LINESHAFT LUABINE (850)		
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	OVERTOP OF (ASINGS EAL		
Discharge Location (Building Pressure Tank, Pond, etc.):	10 CENTER TWO DYSTEM		
Distance and Direction to Nearest Public Utility Well & Well Name:	~44 MILES SW TO MELROSE		
Distance to Other Potential Contaminant Sources:			
Distance to Other Potential Contaminant Sources:			
Leave Blank, for Department use only			

Required Attachments

- Attach one of the maps described in A. or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Well Number or a Permanent High Capacity Well Number, plot the well locations with one of those numbers.
 - A. Copy of a plat map with the property boundary clearly shown. If the property is contiguous with properties owned by the same owner in another township, include a copy of that township map too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the map.
 - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
- 2. Sketch map showing all of the following that are planned or exist within 300 feet of each proposed well: proposed well location; other wells; property boundary; wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If no pertinent features to map within 300 feet of the proposed well, for example an irrigation well in the middle of a field, state that on the property map listed above and plot the well locations on that map.
- 3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or site well number on the record that correlates to the well name or number plotted on the maps.
- 4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
- 5. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components are buried or above ground. If there is more than one check valve within the well casing, include in-well check valves on the schematic.
- If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
- 7. If the application is for a high capacity well or wells, a \$500.00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

Certification and Applicant Signatures

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and incomplete applications will not be approved.

By signing this form, the person signing this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR 812, Wis. Adm. Code. The person also certifies that to the best of his or her knowledge, all information in the application is accurate and correct.

Name - Print	Check Box
JEFF HAUPT	Owner Agent of the Owner
Application submittal. Mail complete application and payment with all require Section / DG/2/ FO Box 7921, Madison WI 53707-7921.	JELL DRILLING TUC 17/19/201: red attachments to DNR, Private Water Systems
Definitions from Wisconsin Administrative Codes	

"High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

"High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate. [NR 812.07(53)]

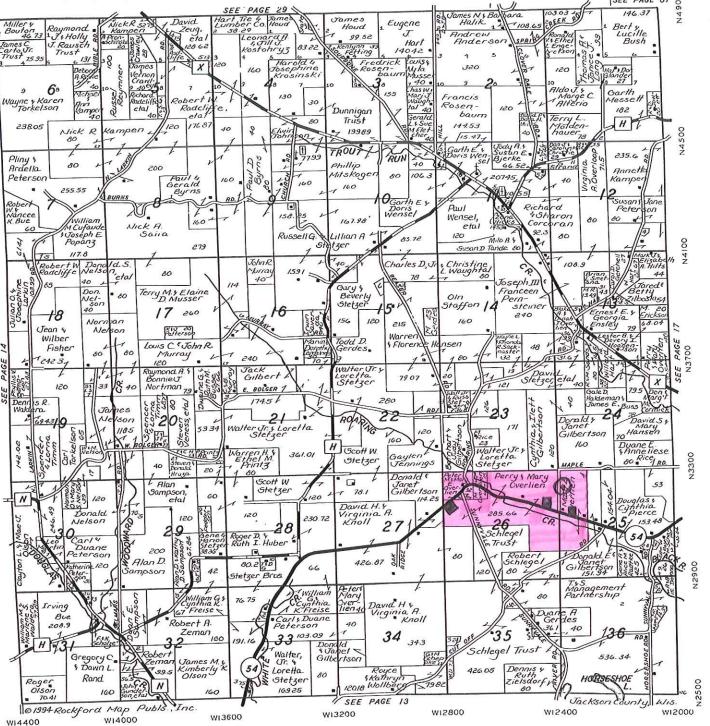
"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR 812.07(80)]

"School" means a public or private educational facility in which a program of educational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers, home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

"Wastewater treatment plant" means any facility provided for the treatment of sanitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private sewage systems in s. 145.01(12), Stats. (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]

[&]quot;High capacity well" means a well constructed on a high capacity property. [NR 812.07(51)]

THATIN ENT



@-PROPOSED HI CAP WELL

SAMPSON BULK MILK SERVICE



Melrose, Wisconsin . . 488-5065 989-2538 Blair, Wisconsin....

#1 In Dairy Business

Cash Dividends Every Year Plus All The Bonuses.



Jackson County Abstract Co. Inc.

ABSTRACTS OF TITLE — TITLE INSURANCE

Over 65 Years of Continuous Service Prompt ☆ Courteous ☆ Reliable

(715) 284-2630

FAX: (715) 284-5453

P.O.Box 487, 106 Main Street Black River Falls, Wisconsin 54615